



International Medical Corps



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Executive Summary

International Medical Corps (IMC) received an award from Management Sciences for Health (MSH) USAID/REACH on June 20, 2004 for successful implementation of the Focused Refresher Training Initiative project in Kabul, Ghazni and Bamyan provinces. This project aims to improve the knowledge and skills of Afghan nurses and doctors in the area of women's and children's health, in order to enhance delivery of the Basic Package of Health Services (BPHS) in Afghanistan.

Refresher training courses, for a minimum of 110 nurses and midwives and 60 doctors, are conducted at the IMC Training Center in Kabul, targeting midwives, nurses and doctors from Kabul and Ghazni, and at the IMC training center in Bamyan, for trainee nurses and doctors from Bamyan. At present, Integrated Management of Childhood Illnesses (IMCI), Newborn Care and Family Planning/Infectious Diseases courses conducted in Kabul for trainees from all three provinces due to heavy snowfall and extremely cold weather in Bamyan. In accordance with the grant agreement, IMC will resume refresher trainings in Bamyan Training when the weather improves in spring.

Within the length of the project, IMC carried out the following major activities:

1. Staff recruitment:

Recruit the project manager, training coordinator, technical monitor, 12 MD physicians as master trainers (7 Male and 5 Female), Admin and Finance officer and other support staff.

2. Adapt and Develop Teaching Materials on ANC/PNC:

MSH REACH assigned IMC to develop training material on Antenatal and Post Natal Care. Therefore, IMC training team performed different activities in this regard,

including the following: knowledge, skills, and attitude checklists about antenatal and postnatal for male and female doctors, and nurses.

- The project technical and management staff regularly participated in the TAG (Technical Advisory Group) weekly meetings in order to discuss the developed training material. The participants of the meeting were representatives from MoPH, MSH REACH, WHO, Unicef, IMC and RBH Maternity hospital.
- Adapt and develop trainees' and trainers' guidelines, curricula, reference manual, and trainee evaluation checklists about antenatal and postnatal care.
- All developed materials were prepared in three languages including Dari, Pashto and English.
- In addition, the technical staff of the project reviewed the Newborn Care teaching materials and providing feedbacks and comments on it to MSH. The Newborn Care teaching materials was already developed by other REACH grantee NGO.

3. Training Need Assessments:

The IMC refresher training team conducted training needs assessments in the three target provinces of Kabul, Ghazni and Bamyan to identify the total number of trainees (doctors, nurses and midwives), and the real need of each trainee on specific modules. Therefore, the IMC training team, with the support of MSH REACH, developed a Need Assessment Checklist. Utilizing that checklist, IMC did assessments for six REACH grantee NGOs include ADRA, BDF, STEP, SDF, RCA, and BRAC in the three target provinces. The reports have already submitted. Based on that assessment, the IMC training team revised the work plan for the refresher training activities and designed the training schedule.

4. TOT Courses for IMC Master Trainers:

In order to build the capacity of Master Trainers, different training courses were conducted for IMC Master Trainers under this project.

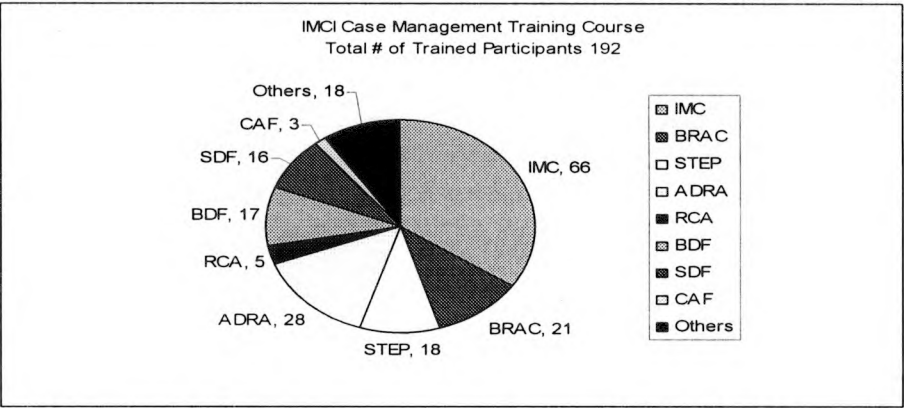
- A one-week Training Methodology course for newly hired master trainers was held.
- Training of seven master trainers in the IMCI training of trainers (TOT) course.
- Training of 12 master trainers using anatomic and other training models in Rabia Bulkhi Hospital.
- IMC master trainers attended a one-week TOT on Care of Newborn, Family Planning, and Infectious Diseases Course conducted by MSH.
- Seven Master Trainers from IMC Kabul training center attended a five-day ToT on Antenatal and Postnatal Care training course from 13 to 17 March 05. This training was designed and conducted by MSH at Rabia Bulkhi Hospital.
- Training Advisor, Technical Monitor, and 11 Master Trainers from IMC Kabul training center attended a three-week ToT on BPHS and Mental Health and Disability from 17 July to 4 August 05. This training was designed and conducted by MSH at Reach Karte Seh Office.
- Twelve IMC master trainers, including the technical monitors, attended a one-week IMCI follow-up training course. The training was conducted by IMCI MoPH department with financial support of IMC.

5. Health Refresher Training Courses:

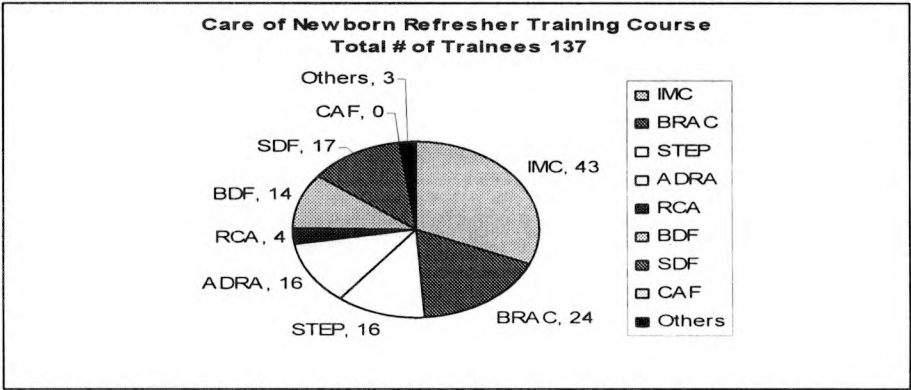
The IMC training team, under the Health Refresher Training Project, conducted (in total) 47 courses on six modules including IMCI, ANC/PNC, Newborn Care, Family Planning/Infectious Diseases, BPHS and Mental Health and Disabilities. In total, 889 participants (471 female, 418 Male) from IMC, SDF, ADRA, STEP, BDF and BRAC attended the training courses as below. Participants were from Kabul, Ghazni and Bamyan provinces. See attachment-A for detailed information.

Following are the summary of the courses.

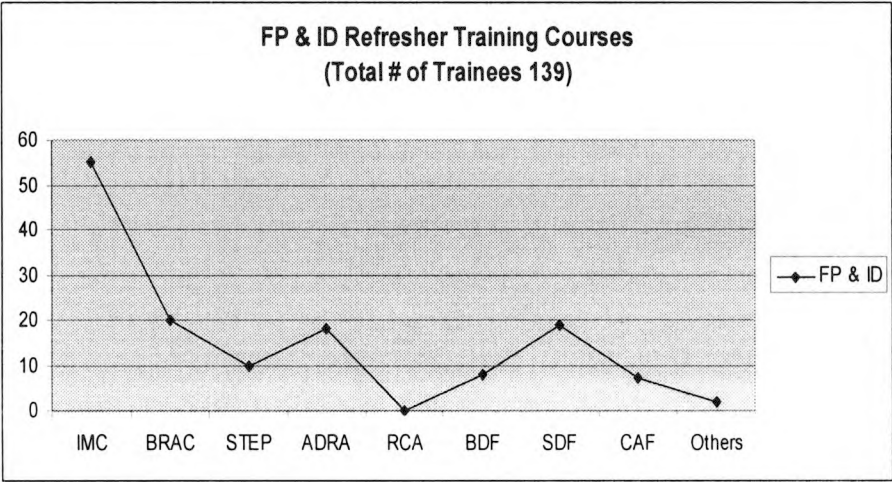
1. Eight 11-day IMCI refresher training courses. 192 participants (72 Female, 120 Male).



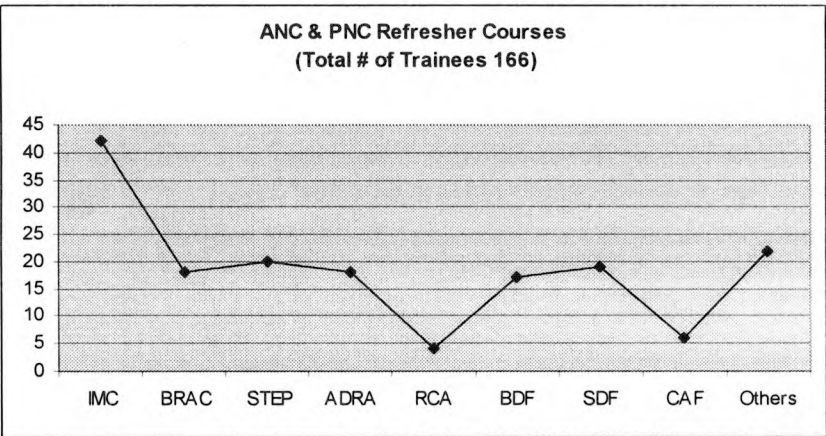
2. Eight 8-day Care of Newborn refresher training courses, 137 participants (68 Female, 69 Male).



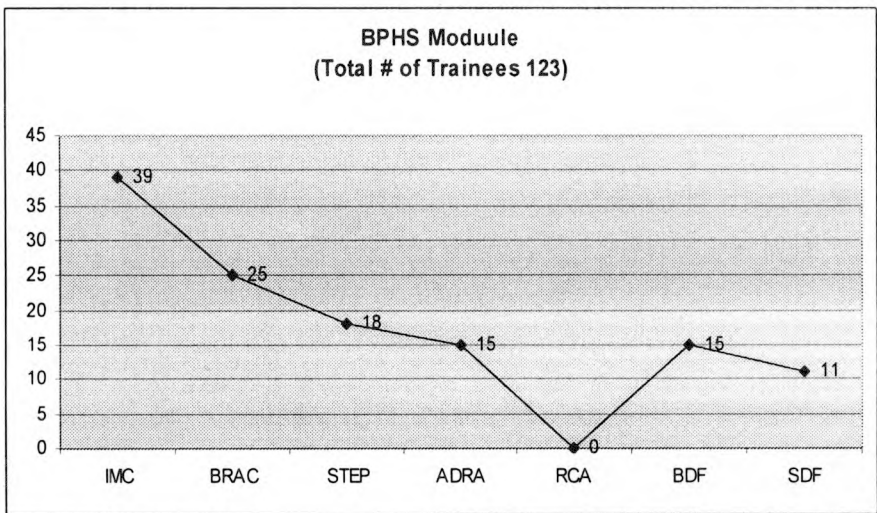
3. Seven 10-day Family Planning and Infection Diseases refresher training courses, 139 participants (93 Female, 46 Male).



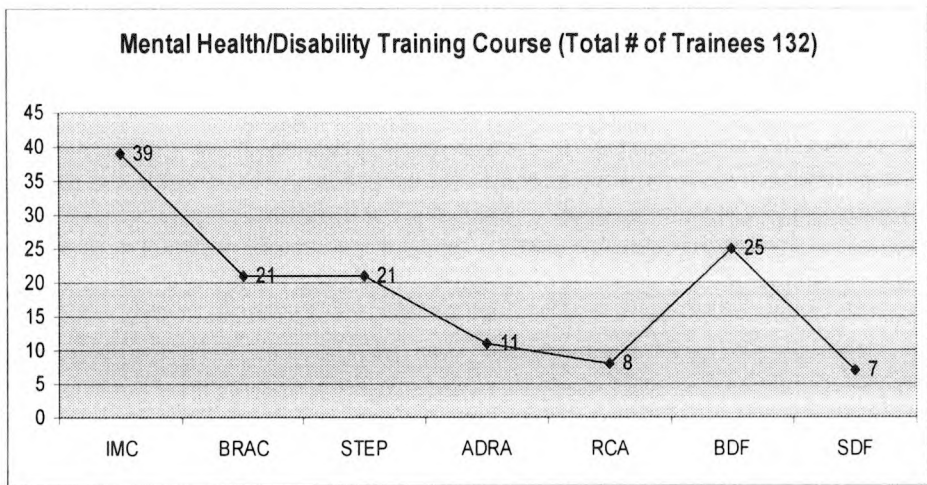
4. Eight 10-day Antenatal and Postnatal Care refresher training courses, 145 participants (111 Female, 34 Male).



5. IMC training department held seven 6-day BPHS refresher training courses, 123 participants (57 Female, 66 Male).



6. Seven 10-day Mental Health/Disability refresher training courses, 132 participants (53 Female, 79 Male).



7. A one-week TOT on Antenatal and postnatal care in IMC training. 21 participants (17 Female, 4 Male) from IbnSina, AKDN and CHA attended this course.

6. IMCI Follow-Up Visits:

To achieve the program objective regarding follow-up of refresher training courses, IMCI/ MoPH department conducted a six- day IMCI Follow-Up after Training course for IMC Master Trainers at the IMC Kabul training center. 12 IMC Master Trainers

attended the course. During the training, 23 health facilities from IMC, STEP and BRAC organizations in Kabul province were followed up. Then, the IMC training department conducted follow up visits of IMCI training in Bamyan and Ghazni provinces. During the follow up visits, 34 health facilities of IMC, SDF and BDF organizations in Bamyan and Ghazni provinces were observed and monitored. The reports were already submitted.

The IMC Training department conducting the refresher training courses for doctors, midwives and nurses achieved remarkable success. IMC overcame various challenges to achieve these significant milestones:

Challenges

- Poor cooperation and coordination by MoPH hospitals when practical sessions had to be conducted.
- Patients and clients were not forthcoming whenever trainees asked them about their reproductive health issues. Female clients would not allow male participants to see them. Also staff of some hospitals did not allow male trainees to enter in the hospital. In such situations, the male trainees had to practice skills only on models.
- Low numbers of cases in the hospitals. Each participant could not practice the skills learned.
- Delays in training time due to traffic and roadblocks in the city, making it difficult for trainees to reach the training sites on time. To compensate, IMC training decided to prolong the duration of training by one day. This meant that training sessions were continued on Saturdays, which were official off days.
- The training modules for both BPHS and Mental health/disabilities are mostly covered by theoretical sessions. In addition, the time is very limited as compared to the volume of information presented to trainees.
- Managing two to three courses at the same time. (Finding appropriate practical training sites for the trainees, dealing with uncooperative hospital authorities and logistical preparation for training activities of such magnitude are everyday challenges)
- Participation of different level of trainees (doctors, midwives and nurses in the same class with many midwives and nurses not even having the standard initial education in midwifery and nursing)
- Poor quality of translated teaching materials in Dari, especially on Family planning/ Infectious Diseases and Newborn care modules.
- High staff turn-over.
- Providing different types of reports and submitting them to donor on time.

Special Successes

- Well-equipped and well-organized training center which meets most of the norms of a standard training center.
- Qualified trainers and capacity building opportunity for newly hired trainers to achieve the required standards as qualified trainers.
- Program implementation on schedule: to date, IMC has trained **889** doctors, nurses and midwives in IMCI, Newborn Care, family Planning/Infectious Diseases and ANC/PNC, Mental Health/Disability and BPHS.
- Maintenance of standard quality training.
- Ability to conduct 2 to 3 courses at the same time, without adversely affecting the quality of training.

- Identification of appropriate practical training sites for trainees such as Malaria and Leishmaniasis Center, Ob/Gyn Hospitals, pediatric hospitals, DOTs treatment centers for TB and Comprehensive Health Centers, so that the trainees can do clinical practice for most of the topics included in training modules.
- Successful completion of the courses by trainees with different levels of education, knowledge and skills.
- Participation by trainees from all target NGOs in spite of road blocks and cold weather during the winter.
- Timely submission of training reports at the end of each course, which meets the requirements of donor.

Lessons learned

- Establish good coordination and cooperation with partners involved through conducting regular meetings, and providing and receiving two-way feedback, to strengthen the quality of training.
- Create an appropriate learning environment for the different levels of course participants by using participatory and active learning methods and effective visual aid teaching materials.
- Deal with the challenges occurring during training courses and find appropriate solutions through meeting with the training team, senior management staff, involving departments/partners and donor, and taking on timely and effective actions.
- Proper dealing with challenges to achieve program objectives successfully.
- The participants with different level of knowledge should not be at the same class. Participants with different knowledge have to be categorized based on their capacity and knowledge in separate classes.
- The participants should not be introduced to different modules of refresher training courses consequently without considering a defined pause. It is recommended that there should be at least one month interval between the first and second module for a trainee. This will give participants to practice all what they have learnt theoretically and being followed up by trainers and technical supervisors for giving extra necessary assistance in field.
- Considering the available spaces for practical training, the number of participants should not exceed 16.
- How conducting several trainings can be organized and managed simultaneously.
- How scheduling and practical work for participants can be organized.
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Suggestions

- A three to five-day break should be considered in between two courses, so that the trainers and the training team as a whole can be refreshed and prepared for the next course.
- All training materials used for training need to be revised and edited. Special focus has to be paid on the translations.
- Providing of well-edited, well-printed and well-numbered handouts to the participants.
